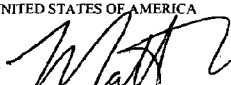


ORDER FOR SUPPLIES OR SERVICES (Contractor must submit four copies of invoice.)						Form Approved OMB No. 0704-0187 Expires Jun 30, 1997		PAGE 1 OF 4	
Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0187), Washington, DC 20503.									
PLEASE DO NOT RETURN YOUR FORM TO EITHER OF THESE ADDRESSES. SEND YOUR COMPLETED FORM TO THE PROCUREMENT OFFICIAL IDENTIFIED IN ITEM 6.									
1. CONTRACT/PURCH ORDER NO. N00383-00-G-023B		2. DELIVERY ORDER NO. UBA3		3. DATE OF ORDER (YYMMDD) 2004 JAN 28		4. REQUISITION/PURCH REQUEST NO. YPC03308000340		5. PRIORITY DOA1	
6. ISSUED BY Defense Supply Center Columbus 3990 E. Broad St. P.O. Box 16704 Columbus, OH 43216-5010 Local Administrator: PAABCAU (614)692-1983 / FAX: (614)693-1679 E-mail: William.West@dla.mil				7. ADMINISTERED BY (If other than 6) CODE S1110A DCMC GRUMMAN ST AUGUSTINE 5000 US 1 N PO DRAWER 3447 (904) 825-3563 ST AUGUSTINE FL 32085-3447 CRITICALITY: C		8. DELIVERY FOB <input type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER (See Schedule if other)			
9. CONTRACTOR CODE 61174 NORTHROP GRUMMAN SYSTEMS CORPORATION 5000 US HIGHWAY 1 NORTH P.O. BOX 3447 SAINT AUGUSTINE FL 32095-6200				FACILITY CODE		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) 330 DAYS ADO		11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED	
14. SHIP TO CODE See Schedule - Do Not Ship to Address in Block 6				15. PAYMENT WILL BE MADE BY CODE S33181 ATTN DFAS CO BVDPC/CC CONSTRUCTIO 3990 E BROAD ST PO BOX 182317 COLUMBUS OH 43218-6203 EFT: T		13. MAIL INVOICES TO See Block 15			
16. DELIVERY <input checked="" type="checkbox"/> This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract. TYPE OF ORDER PURCHASE Reference your offer dated 2003 DEC 11, A102003-0336 and furnish the following on terms specified herein ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME									
NAME OF CONTRACTOR SIGNATURE TYPED NAME AND TITLE DATE SIGNED (YYMMDD) <input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:									
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE CG: 97X4930 5CC0 001 26.0 S33150 97X4930 5CC0 001 22.1 S33150 (TRANS)									
18. ITEM NO.	19. SCHEDULE OF SUPPLIES/SERVICE				20. QUANTITY ORDERED/ACCEPTED*	21. UNIT	22. UNIT PRICE	23. AMOUNT	
	Remarks: CONFIRMING ORDER -- DO NOT DUPLICATE ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT.				TOTAL: 22				
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.					24. UNITED STATES OF AMERICA BY 		25. TOTAL \$ 21510.06		
26. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED					27. SHIP. NO <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		28. DO VOUCHER NO.		29. DIFFERENCE
DATE SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE					31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		32. PAID BY		30. INITIALS
36. I certify this account is correct and proper for payment. DATE SIGNATURE AND TITLE OF CERTIFYING OFFICER					40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER		33. AMOUNT VERIFIED CORRECT FOR
37. RECEIVED AT	38. RECEIVED BY (Print)		39. DATE RECEIVED (YYMMDD)		42. S/R VOUCHER NO.		34. CHECK NUMBER		
							35. BILL OF LADING NO.		

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ALL TERMS AND CONDITIONS OF BOA N00383-00-G-023B APPLY AND TAKE PRECEDENCE
OVER ANY AND ALL CONFLICTING TERMS AND CONDITIONS CONTAINED IN THIS
PURCHASE ORDER.

CONTINUATION SHEET

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SECTION B

PR YPC03308000340
NSN 3040-01-005-4252

ITEM DESCRIPTION:

CONNECTING LINK, RIGID.
END ITEM A-10A AIRCRAFT.

CRITICAL APPLICATION ITEM

NORTHROP GRUMMAN SYSTEMS CORPORATIO (26512) P/N 160D120115-1

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001	YPC03308000340	0001	22	EA	\$977.73000	\$21510.06

QTY VARIANCE: PLUS 0% MINUS 0%
INSPECTION POINT: ORIGIN
ACCEPTANCE POINT: ORIGIN

PREP FOR DELIVERY

PKGING DATA - MIL-STD-2073-1D, 15 DEC 1999
QUP = 001: PRES MTHD = 10: CLNG/DRY = 1: PRESV MAT = 00:
WRAP MAT = XX: CUSH/DUNN MAT = XX: CUSH/DUNN THKNESS = X:
UNIT CONT = E6: OPI = 0:
INTRMDTE CONT = D3: INTRMDTE CONT QTY = AAA:
PACK CODE = U:
MARKING SHALL BE IN ACCORDANCE WITH MIL-STD-129.
SPECIAL MARKING CODE: 00 - NO SPECIAL MARKING.
PALLETIZATION SHALL BE IN ACCORDANCE WITH DC1636P001 REV E
DATED 3029

DOD BAR CODE MARKING REQUIRED IN ACCORDANCE WITH
MIL-STD-129 (LATEST REVISION) MARKING AND BAR
CODING IN ACCORDANCE WITH AIM BC1.

DELIVER FOB: ORIGIN BY: 2004 DEC 23

PARCEL POST ADDRESS:

CONTINUED ON NEXT PAGE

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SECTION B

SW3210
DISTRIBUTION DEPOT HILL
7537 WARDLEIGH RD
HILL AFB UT 84056-5734

FREIGHT SHIPPING ADDRESS:

SW3210
DISTRIBUTION DEPOT HILL
7537 WARDLEIGH RD BLDG 849W
HILL AFB UT 84056-5734

NON-MILSTRIP
PROJ

* * * * *

REMIT PAYMENT TO:

* * * * *